USGS science for a changing world

GSN

USAID FROM THE AMERICAN PEOPLE

M 6.7, NEW IRELAND REGION, PAPUA NEW GUINEA

Origin Time: Wed 2007-09-26 12:36:23 UTC

Location: 4.88˚S 153.40˚E Depth: 10 km

PAGER
Version 1
Created: 7 days, 4 hrs after earthquake

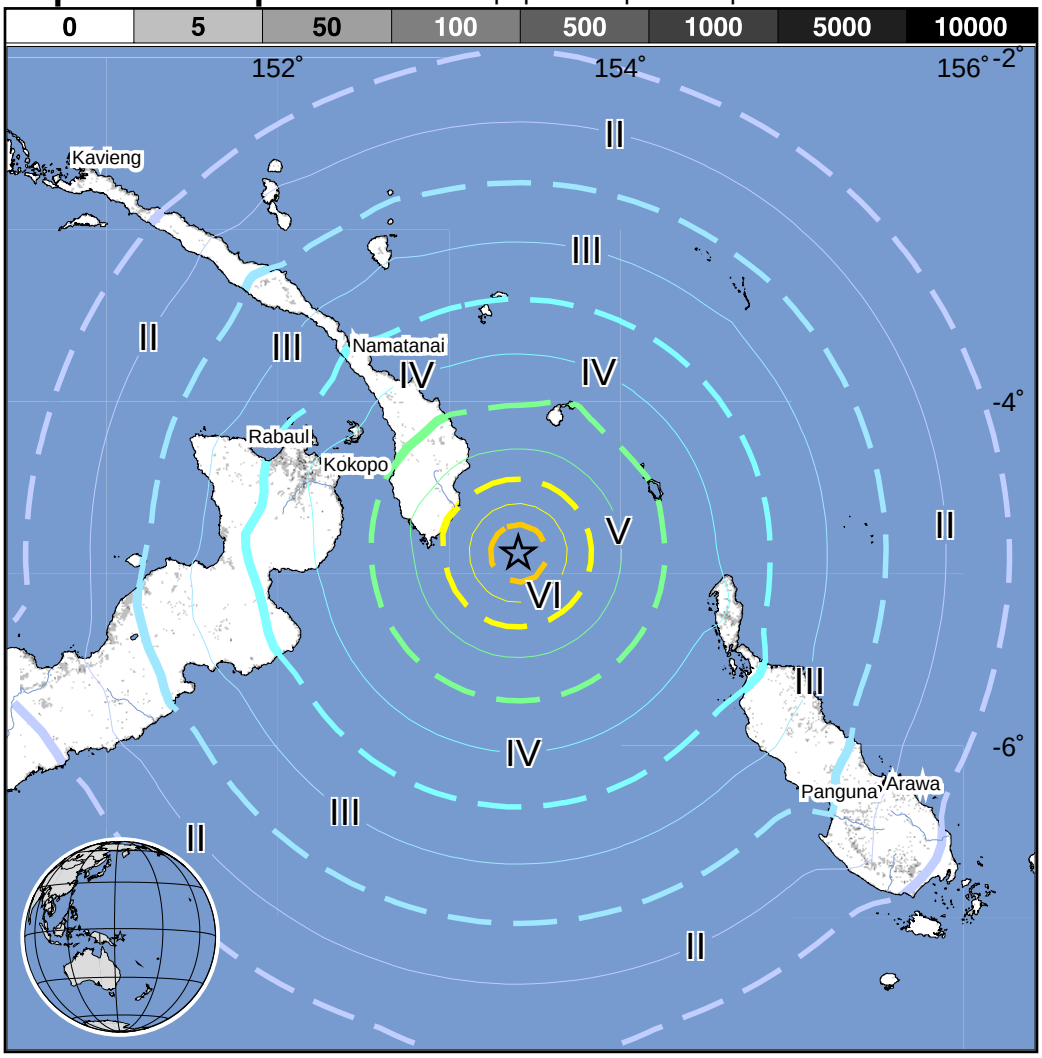
Estimated Population Exposed to Earthquake Shaking

ESTIMATED POPULATION EXPOSURE (k = x1000)		54k*	186k*	276k	16k	1k	0	0	0	0
ESTIMATED MODIFIED MERCALLI INTENSITY		I	II-III	IV	V	VI	VII	VIII	IX	X+
PERCEIVED SHAKING		Not felt	Weak	Light	Moderate	Strong	Very strong	Severe	Violent	Extreme
POTENTIAL DAMAGE	Resistant Structures	none	none	none	V. Light	Light	Moderate	Moderate/Heavy	Heavy	V. Heavy
	Vulnerable Structures	none	none	none	Light	Moderate	Moderate/Heavy	Heavy	V. Heavy	V. Heavy

*Estimated exposure only includes population within the map area.

Population Exposure

population per ~1 sq. km from Landscan 2005



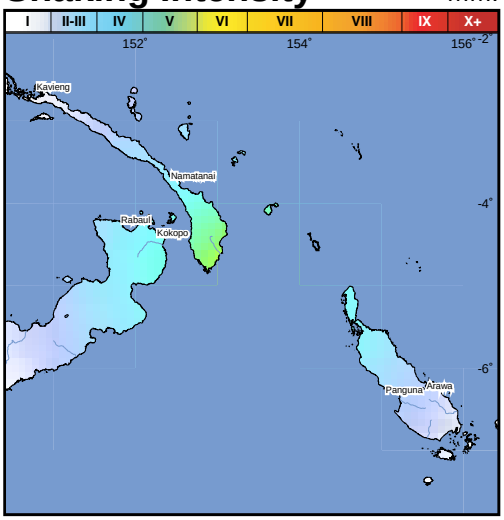
Selected City Exposure

MMI	City	Population
IV	**Kokopo**	**26k**
IV	**Rabaul**	**8k**
IV	**Namatanai**	**1k**
II	**Panguna**	**2k**
II	Kieta	3k
II	**Arawa**	**40k**
I	**Kavieng**	**14k**

bold cities appear on map (k = x1000)

Shaking Intensity

MMI



Users should consider the preliminary nature of this information and check for updates as additional data becomes available. Population exposure estimates are NOT a direct estimate of earthquake damage; comparable shaking will result in significantly lower losses in regions with well built structures than in regions with vulnerable structures. Overall, structures in this region are vulnerable to earthquake shaking, though some resistant structures exist. A magnitude 7.6 earthquake struck the Papua New Guinea region on September 8, 2002 (UTC), with estimated population exposures of 4,600 at intensity IX or greater and 35,000 at intensity VIII, resulting in 4 deaths. Recent earthquakes in this area have also triggered tsunami, landslide and liquefaction hazards that have contributed to losses.

This information was automatically generated and has not been reviewed by a seismologist.